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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new non-provisional applications under 37 CFR 1.53(b))

Attorney Docket No.	PRICE1240-2	C/M # 103749-165193
First Inventor or Application Identifier:	W. Scott Callaway	
Title:	METHOD AND SYSTEM FOR EXTENSIBLE DATA PROCESSING	
Express Mail Label No.:	EL233952804US	

Application Elements (See MPEP chapter 600 concerning utility patent application contents)	ADDRESS TO: Assistant Commissioner For Patents BOX PATENT APPLICATION Washington, D.C. 20231
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<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, & duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages <u>20</u>] (preferred arrangement set forth below)</p> <ul style="list-style-type: none">• Descriptive title of the Invention• Cross References to Related Applications• Statement Regarding Fed sponsored R&D• Background of the Invention• Brief Summary of the Invention• Brief Description of the Drawings (if filed)• Detailed Description• Claim(s)• Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total sheets <u>6</u>]</p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages <u>3</u>]</p> <p>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed)</p> <p>i. <input type="checkbox"/> Deletion of Inventor(s) Signed statement attached in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table, or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. <input type="checkbox"/> Specification Sequence Listing on:</p> <p>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p>ii. <input type="checkbox"/> paper</p> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p> <p>ACCOMPANYING APPLICATION PARTS</p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement [] Power Of Attorney (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS/PTO 1449) [] Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment (___ pgs.)</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input checked="" type="checkbox"/> Express Mail Certification</p> <p>17. <input type="checkbox"/> Request And Certification under 35 USC 122(b)(2)(B)(i). Applicant must attach form PCT/SB/35 or its equivalent</p> <p>18. <input checked="" type="checkbox"/> OTHER: Check # <u>465918</u> (\$355)</p>
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17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-In-Part of prior application no.: /


Prior application information: Examiner: Group/Art Unit:

18. CORRESPONDENCE ADDRESS

☐ Customer Number (25548)
Or Bar Code Label

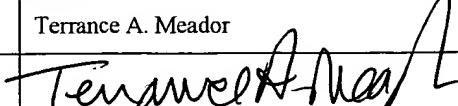
OR

☐ Correspondence Address Below


25548

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Telephone: 619/699-2652	General Fax No.: 619-236-1048	Patent Group Fax No.: 619/699-3452
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Name (print/type)	Terrance A. Meador	Registration No.: (Attorney/Agent)	30,298
Signature		Date	19 January 2001

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FEE TRANSMITTAL

Attorney Docket No.	PRICE1240-2
First Named Inventor:	W. SCOTT CALLAWAY
Application Number	Unknown
Filing Date:	Herewith
Examiner Name:	Unknown
Group/Art Unit:	Unknown

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TOTAL AMOUNT OF PAYMENT:	\$ 355.00
METHOD OF PAYMENT (check One)	<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:</p> <p>Deposit Account No.: 07-1895 Deposit Account Name: GRAY CARY WARE & FREIDENRICH</p> <p><input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>

2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$ 710.00	\$355.00	\$ 355.00
Total Claims	20 - 20 =	0	X \$ 18.00	X \$ 9.00	\$ 0.00
Independent Claims	2 - 3 =	0	X \$ 80.00	X \$ 40.00	\$ 0.00
Multiple Dependent Claim(s) (if applicable)			\$ 270.00	\$135.00	\$ 000.00
Total of above Calculations =					\$ 355.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$ 320.00	\$ 160.00	\$ 000.00
Reissue filing fee	\$ 710.00	\$ 355.00	\$ 0.00
Provisional filing fee	\$ 150.00	\$ 75.00	\$ 0.00
Total of above Calculations =			\$

3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$

Name (print/type)	Terrance A. Meador	Registration No.: (Attorney/Agent)	30,298
Signature	<i>Terrance A. Meador</i>	Date	19 January 2001

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5	Mr. M. N. Black	202 Pine St.	Decatur	Ill.	62521
6	Mr. P. Q. Green	303 Cedar St.	Normal	Ill.	62451
7	Mr. R. S. Hall	404 Birch St.	Urbana	Ill.	61501
8	Mr. V. T. King	505 Walnut St.	Macomb	Ill.	61451
9	Mr. X. Y. Lee	606 Spruce St.	Streator	Ill.	61361
10	Mr. Z. A. Clark	707 Ash St.	LaSalle	Ill.	61301
11	Mr. B. C. Evans	808 Hickory St.	Marion	Ill.	61751
12	Mr. D. E. Foster	909 Cypress St.	Shelbyville	Ill.	62451
13	Mr. F. G. Hill	1010 Dogwood St.	Wilmington	Ill.	62451
14	Mr. H. I. Young	1111 Magnolia St.	Waukegan	Ill.	60081
15	Mr. J. K. Allen	1212 Sycamore St.	Winnetka	Ill.	60091
16	Mr. L. M. Wright	1313 Tulip St.	Wilmette	Ill.	60091
17	Mr. N. O. Scott	1414 Violet St.	Winthrop	Ill.	60091
18	Mr. P. R. Adams	1515 Zinnia St.	Winthrop	Ill.	60091
19	Mr. Q. S. Baker	1616 Camellia St.	Winthrop	Ill.	60091
20	Mr. R. T. Nelson	1717 Daffodil St.	Winthrop	Ill.	60091

SIGNATURE

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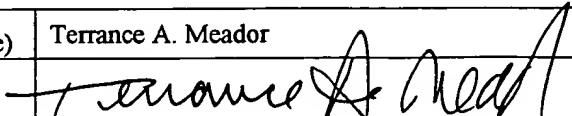
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